

BCNA Breast implant management

We provide coverage for this procedure for adult members who meet medical necessity criteria. Submit authorization requests through the e-referral system.

The submitter will receive a prompt to complete a questionnaire to determine the appropriateness of the requested service. The questions are listed below.

If all questions are answered, e-referral will either approve or pend the case. If the case pends and we cannot authorize it, we will contact the provider for additional clinical information. Authorization is not a guarantee of payment.

Payment is based on established claim edits. We may retrospectively monitor compliance with authorization requirements.

Applicable procedure codes: *19325, *19328, *19330

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See below for the questions you'll encounter in the e-referral system.

Q Does the patient have a mechanical complication of breast prosthesis including ONE of the following A-C? A. Rupture. B. Failed implant. C. Implant extrusion.

A

Possible answers: Yes No N/A

Q Does the patient have an infection or inflammatory reaction due to a breast prosthesis including infected breast implant or rejection of breast implants?

A

Possible answers: Yes No N/A

Q Does the patient have other complications of internal breast implants including ONE of the following A-D? A. Siliconoma (area of inflammation from silicone). B. Granuloma (a small area of inflammation). C. Interference with diagnosis of breast cancer. D. Painful capsular contracture with disfigurement.

A

Possible answers: Yes No N/A